Case 16-23217 Doc 1 Fill in this information to identify your case:	Filed 07/20/16	Entered 07/20/16 09:36:46 age 1 of 73	Desc Main
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name Write the name that is on	Consuelo First name	First name
your government-issued picture identification (for example, your driver's	Middle name Davis	Middle name
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or	Middle name	wilddie name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX	xxx - xx-
Security number or	OR	OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

consuc@ase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16/09:36:46 Desc Main Debtor 1 Page 2 of 73 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 636 E 158th St Number Number Street Street South Holland 60473 Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ₩ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Consuc Gase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16/09:36:46 Desc Main Debtor 1 Page 4 of 73 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Number Street that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

You must check one: ✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

oounsening beed	usc 01.
Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of

I am not required to receive a briefing about credit

counseling because of

realizing or making rational decisions about finances.

My physical disability causes me to be Disability. unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

Active duty.

I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Consu**©**ase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main Debtor 1 Page 6 of 73 Document of the Document of th **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your **✓** \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Consuelo Davis Signature of Debtor 2 Signature of Debtor 1 Executed on _ 7/20/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

		_	-100 100 10
/s/ Mark Bernachea Signature of Attorney for Debtor		Date	 MM / DD / YYYY
Mark Bernachea			
Printed name			
Semrad Law Firm			
Firm name			
11101 S. Western Avenue			
Street			
Chicago	Illinois		60643
City	State		Zip Code
Contact phone		E	imail address
6317545		II	linois
Bar number			State

Doc 1 Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main Fill in this information to identify your case: Debtor 1 Consuelo Davis First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$102,666.67 1a. Copy line 55, Total real estate, from Schedule A/B..... \$16,285.00 1b. Copy line 62, Total personal property, from Schedule A/B \$118,951.67 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$165,043.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$35,235,00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$200,278.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$3.651.02 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$3,026.00

Debtor 1 ConsulCase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 (09:36:46 Desc Main

Page 9 of 73 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$6,904.33 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00

\$0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

	Case 16-23217	7 Doc 1	Filed 07/20/16	<u>Entered 07/2</u> 0/16 09:36:46	Desc Main
Fill in this	information to identify your case	:			
Debtor 1	Consuelo		Davis		
Debior 1	First Name	Middle	Name Last N	_	
Debtor 2					
	if filing) First Name	Middle	Name Last N	Name	
United St	ates Bankruptcy Court for the:	Northern	District of II	llinois	
_			(State)	
Case nun (If known)					
200	1. E				Check if this is an
Officia	al Form 106A/B				amended filing
3che	dule A/B: Prope	rty			12/
ategory v esponsik vrite your	where you think it fits best. Be ble for supplying correct infor name and case number (if kn	e as complete an mation. If more s own). Answer ev	d accurate as possible. space is needed, attach very question.	n asset fits in more than one category, list the lift two married people are filling together, both a separate sheet to this form. On the top of the lift is state You Own or Have an Interest.	oth are equally f any additional pages,
	u own or have any legal or equ				
	No. Go to Part 2		,		
	Yes. Where is the property?				
			What is the property	? Check all that apply. Do not deduct	secured claims or exemptions. Put
1.1	Street address, if available, or	other description	_ ✓ Single-family home		any secured claims on Schedule D: Description Have Claims Secured by Property.
	636 E 158th St	outer description	Duplex or multi-un	it building	, ,
	Number Street		Condominium or co	entire proper	
	•		Manufactured or m	nobile home \$102666.67	\$102666.67
	South Holland Illinois City State	60473 Zip Code	_ Land Investment property	Describe the	nature of your ownership
		Zip Codo	Timeshare	' interest (such	h as fee simple, tenancy by
	Cook County		Other		s, or a life estate), if known.
	,		N/I - 1 '- 1 1	Homestead .	
			Debtor 1 only	in the property? Check one.	this is community property
			Debtor 2 only		ructions)
			Debtor 1 and Debtor	or 2 only	
				debtors and another	
			_	ou wish to add about this item, such as loca	al
			property identification		
If you	own or have more than one, list h	ere:	Mile at the discourse of	2 Charle all that areals	and deligration of the control of th
1.2			What is the property Single-family home	the same of a f	secured claims or exemptions. Put any secured claims on Schedule D:
1.2	Street address, if available, or	other description	Single-ramily nome Duplex or multi-un	Creditors Who	Have Claims Secured by Property.
			_ Condominium or co	0	
			Manufactured or m	entire proper	ty? portion you own?
			Land		
	Number Street		Investment property		nature of your ownership
			Timeshare		n as fee simple, tenancy by s, or a life estate), if known.
	City State	Zip Code	Other		
			Who has an interest	in the property? Check one. Check if	this is community property
			Debtor 1 only		ructions)
			Debtor 2 only	ш.	
			Debtor 1 and Debtor	or 2 only	
			<u> </u>	debtors and another	

Other information you wish to add about this item, such as local property identification number:

Debtor 1	Consu ©ase 16-232 First Name	17 Doc 1 I	Filed 07/20/16 <u>Entered</u> 07/20/16 Documeମtr Page 11 of 73	6/09:36: <u>46 Des</u>	c Main
1.3 Stre	et address, if available, or oth	ner description	hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? Describe the nature of interest (such as fee sin	d claims on Schedule D: ims Secured by Property. Current value of the portion you own? your ownership mple, tenancy by
City	State	Zip Code W	ho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is cor	
you ha		proion you own for all control of the control of th	her information you wish to add about this item, soperty identification number: of your entries from Part 1, including any entries for the source of the so	or pages 1026	66.67
Do you ov ou own th	vn, lease, or have legal or e at someone else drives. If you ns, trucks, tractors, sport utilit	quitable interest in a lease a vehicle, also r	ny vehicles, whether they are registered or not? In eport it on Schedule G: Executory Contracts and Unexpes		
	Make Model: Year: Approximate mileage: Other information: used	Toyota Prius 2014 48000	Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property? \$13275.00	•
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property?	

Debtor 1	Consu ©ase 16-23217 Doc 1 First Name Middle Name	Filed 07/20/16 Entered 07/20/16 Document Page 12 of 73	6/09/36: <u>46 Desc Main</u>
3.3	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) er recreational vehicles, other vehicles, and accessor, fishing vessels, snowmobiles, motorcycle accessories	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
4.1	Yes Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property.</i> Current value of the entire property? Current value of the portion you own?
	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
		Il of your entries from Part 2, including any entries f	1 \$13275.00

Debtor 1 Consu**©ase 16-23217**First Name
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 Middle Name
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Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Yes. Describe miscellaneous household goods and furnishings	\$1000.00
	Ψ1000.00
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
□ No	
Yes. Describe television, cell phone, computer	\$600.00
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
✓ No	
Yes. Describe	
9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
▼ No	
Yes. Describe	
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
<u>✓</u> No	
Yes. Describe	
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Yes. Describe used clothing and apparel	\$650.00
	φοσο.σσ
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
✓ No	
Yes. Describe	
13. Non-farm animals Examples: Dogs, cats, birds, horses	
✓ No	
Yes. Describe	
14. Any other personal and household items you did not already list, including any health aids you did not list	st
☑ No	
Yes. Describe	
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	#0050.00
for Part 3. Write that number here	\$2250.00

Debtor 1 Consuctase 16-23217
First Name

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Middle Name Document Page 14 of 73 **Describe Your Financial Assets** Current value of the

Do	you own or have a	ny legal or equitable inte	rest in any of the following	g?	portion you own? Do not deduct secured claims or exemptions.
-	✓ No	in your wallet, in your home, in a sa	afe deposit box, and on hand when yo	ou file your petition Cash:	
17.			certificates of deposit; shares in crecints with the same institution, list eac		
	✓ Yes		Institution name:		
		17.1. Checking account:	US Bank		\$600.00
		17.2. Checking account:	TCF		\$160.00
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		or publicly traded stocks vestment accounts with brokerage	firms, money market accounts		
	✓ No ☐ Yes	Institution or issuer name:			
19.	an LLC, partnership, a		ed and unincorporated business	es, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	
		-			

Doc 1 Document Page 15 of 73 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **✓** No Type of account: Institution name: Yes. List each account separately. 401(k) or similar plan: 401(k) or similar plan: Pension plan: Pension plan: IRA: IRA: Retirement account: Retirement account: Keogh: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debte	or 1	Consue Co	ase	16-2	23217	Doc 1		<u>07/20/16</u> cumente				6 (09;36: <u>46</u>	De	sc Main
24.						n account in 529(b)(1).	a qualifie	d ABLE progra	m, or ur	nder a qu	alified stat	te tuition program.		
		No Yes	Institu	ution na	ame and d	escription. Sep	oarately file	the records of a	ny intere	ests.11 U.S	S.C. § 521(d	c):		
25.	exe	rcisable fo	or you			ts in property	(other that	an anything lis	ted in lii	ne 1), and	d rights or	powers		
26.			rights					intellectual pro						
	_	Mpies: Inte No Yes. Desc			names, we	ebsites, procee	eds from ro	yalties and licens	sing agre	eements				
27.						eneral intangil e licenses, coo		ssociation holdin	gs, liquo	or licenses	s, profession	nal licenses		
		No Yes. Desc	ribe											
Mon	iey (or prope	erty c	owed	to you'	?							p o Do	urrent value of the ortion you own? onot deduct secured aims or exemptions.
28.	Tax	refunds ov	wed to	you										
	V													
	Π,	Yes. Give s about			mation ding wheth	er						Federal:		
		you a	Iready	filed th	he returns							State:		
20	Eom	ily suppor		ycars.								Local:		
				r lump	sum alimo	ny, spousal su	oport, child	support, mainte	nance, d	livorce set	tlement, pro	perty settlement		
	✓	No												
		Yes. Give s	pecific	inforr	mation							Alimony:		
												Maintenance:		
												Support:		
												Divorce settlement	:	
												Property settlemen	t:	
		er amounts nples: Unpa					nts, disabil	lity benefits, sick	pay, vac	ation pay,	workers' cor	mpensation,		
				-	-	oaid loans you		-						
		No												
	Ш`	Yes. Descr	ibe											

Debt	tor 1	Consu ©ase 16 First Name	5-23217	Doc 1 Middle Name		<u>07¢2@/16</u> um'ë'n't [™]	Entere Page 1		16 (09:36: <u>46</u>	Des	c Main
31.		rests in insurance p mples: Health, disabi		rance; health			•		r's insurance		
		No Yes. Name the insura of each policy and lis			Company na	me:			Beneficiary:		Surrender or refund value:
32.	If you	interest in property u are the beneficiary erty because someor No Yes. Describe	of a living trust				policy, or are	currently entitle	ed to receive		
33.		ms against third pa mples: Accidents, em					ade a dema	nd for payme	nt		
		No Yes. Describe								_	
34.		er contingent and i	unliquidated	claims of e	ery nature,	, including co	unterclaims	of the debtor	and rights		
	H	No Yes. Describe									
35.	_	financial assets yo	u did not alre	ady list							
		Yes. Describe								_	
36.		the dollar value of Part 4. Write that nu	-					-			\$760.00
Part	5:	Describe Any B	usiness-Ro	elated Pro	perty You	ı Own or H	ave an Int	erest In. Lis	st any real estate	in P	art 1.
37.	Do y	ou own or have an	y legal or equ	uitable intere	est in any b	usiness-relate	d property?				
		No. Go to Part 6. Yes. Go to line 38.								por Do	rrent value of the rtion you own? not deduct secured claims exemptions
38.	_	ounts receivable or	commissions	s you alread	y earned					OI C	worthpliotio
	=	No Yes. Describe									
39.		ce equipment, furn nples: Business-rela			odems, print	ters, copiers, fa	x machines,	rugs, telephone	es, desks, chairs, electr	onic de	evices
		No Yes. Describe								_	

		Consuctase 16 First Name		Doc 1 Middle Name	Filed 07/20/16 Document	Page 18 of 73	.6 ∕09;36: <u>46 D</u>	esc Main	
40.	Mac	hinery, fixtures, eq	uipment, sup	plies you us	se in business, and tools	of your trade			
	✓	No							
		Yes. Describe							
41.	Inve	entory							
	✓	No							
	□	Yes. Describe							
42.	Inte	rests in partnershi	ps or joint ve	entures				1	
	✓		. ,						
					Name of entity:		% of ownership:		
		Yes. Give specific information about							
		them		•					_
				;					_
							-	<u> </u>	_
43. C	Custo	omer lists, mailing	lists, or other	compilation	ns				
	V	No							
	=		clude personal	ly identifiable	information (as defined in	I1 U.S.C. § 101(41A))?			
		_	·		·	- , ,,			
		☐ No							
		Yes. Descri	ibe						_
44.	Any	business-related p	roperty you o	lid not alread	dy list				
	_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•				
		Yes. Give specific information							
		inionnation		•					
					_				
				•					
									-
			-			for pages you have attach			
Part	6:	Describe Any F	arm- and (Commerciand list it in	al Fishing-Related P	roperty You Own or H	lave an Interest In	l.	
46.	Do	vou own or have a	ny legal or eg	uitable inter	est in any farm- or comm	ercial fishing-related prop	ertv?		
		No. Go to Part 7.			•	Ç p	-	Current value of the	he
								portion you own?	
	Ш	Yes. Go to line 47.						Do not deduct secur	ed
								claims or exemptions	
47.	Farı	m animals							
		mples: Livestock, pou	ultry, farm-raise	ed fish					
	V	No							
	Ħ	Yes. Describe						1	
	Ш	D03011DC							

Deb	tor 1	Consu ©ase 16 First Name	-23217	Doc 1	Filed 07/2 Docume		Entered 07/	20/16 /09:36: <u>46</u> 3	Desc	Main
48.	Cro	ps-either growing o	r harvested		Boodino		. ago 10 0. 7			
	✓	No								
		Yes. Describe							_	
49.	Farr	n and fishing equip	ment, imple	ements, mach	inery, fixtures, a	nd tools	of trade			
	✓	No								
		Yes. Describe							_	
50.	Farı	m and fishing suppl	ies, chemica	als, and feed						
	✓	No								
		Yes. Describe								
51.	Any	farm- and commer	cial fishing-r	related proper	ty you did not al	ready lis	st			
	✓	No								
		Yes. Describe								
52 A	dd th	o dollar value of all	of your optr	rice from Part	6 including any	ontrios	for pages you have	attached		
			-				pages you have			
				_						
Part		Describe All Pro ou have other prop				st in Th	nat You Did Not L	ist Above		
53.		nples: Season tickets			iot aiready list?					
	✓	No								
		Yes. Give specific								
		information								
									[
54. A	dd th	e dollar value of all	of your entr	ies from Part	7. Write that nun	nber hei	·e		.	
			•						l	
Part	8:	List the Totals o	of Each Pa	rt of this F	orm					
55. i	Part 1	: Total real estate, li	ne 2					>		\$102666.67
56. p	oart 2	total vehicles, line	5		;	\$13275.0	0			
57. P	art 3:	: Total personal and	l household	items, line 15	•	\$2250.00				
58. P	art 4:	: Total financial asso	ets, line 36		-	\$760.00				
59. F	Part 5	: Total business-re	lated proper	ty, line 45	•					
60. F	Part 6	: Total farm- and fis	shing-relate	d property, lin	e 52					
61. F	Part 7	: Total other proper	rty not listed	d, line 54	-					
62. 7	Γotal	personal property. /	Add lines 56 t	through 61		\$16285.0	0			+ \$16285.00
		· · ·		•	2	ψ10200.0		Copy personal property to	otal >	Ι Ψ10200.00
										\$118951.67
63. T	otal c	of all property on So	hedule A/B.	. Add line 55 +	line 62					

		Case 16-23217	Doc 1 Filed	07/20/16	Entered 07/2)/16 09:36:46	Desc Main
Fill in	this informa	ation to identify your case:			Ü		
Debt	or 1	Consuelo		Davis			
		First Name	Middle Name	Last N	ame		
Debt (Spo		First Name	Middle Name	Last N	ame		
Unite	ed States Ba	nkruptcy Court for the:	Northern	District of III	_		
Case (If kn	e number own)			(8	State)		
Off	icial F	orm 106C					Check if this is amended filing
3cl	hedule	e C: The Prop	erty You Cla	aim as Ex	empt		12/
For established	each item state a suppled up ive certa nption of eerty is defended. 1: Ident Which set	pecific dollar amou to the amount of a in benefits, and tax	aim as exempt, you not as exempt. Alter my applicable statu-exempt retirement to value under a law do that amount, you Claim as Exempt claiming? Check one only I nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2)	u must specificatively, you tory limit. So the funds—may that limits the exemption of the funds	y the amount of the may claim the full me exemptions—be unlimited in done exemption to a would be limited to buse is filing with you.	I fair market value such as those for lollar amount. How particular dollar a o the applicable s	claim. One way of doing se of the property being realth aids, rights to wever, if you claim an amount and the value of the statutory amount.
		ription of the property a lle A/B that lists this pro		u Check on	of the exemption you ly one box for each exer	•	cific laws that allow exemption
	Drief	C2C F 4504b C4 Ca	41-				735 ILCS 5/12-901
	Brief description	636 E 158th St, Sou Holland, IL 60473	\$102,666.67	_ 🗆			
	Line from Schedule A	/B:01			6 of fair market value, up	to any	
	Brief	. IIC Dank	\$600.00				735 ILCS 5/12-1001(b)
	description Line from		Ψ000.00	_ <u> </u>	\$600.00 6 of fair market value, up	to any	
_	Schedule A	/B: <u>17</u>			cable statutory limit		
3.	(Subject to	aiming a homestead exe adjustment on 4/01/19 and id you acquire the property	every 3 years after that fo	or cases filed on or	·	,	

No Yes

Debtor 1 Consul Gase 16-23217
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Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Schedule A/B		
Brief description: TCF Line from Schedule A/B: 17	\$160.00	\$160.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief used clothing and apparel Line from Schedule A/B: 11	\$650.00	\$650.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
miscellaneous household goods and description: Line from Schedule A/B: miscellaneous household goods and furnishings 06	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief television, cell phone, description: computer Line from Schedule A/B: 07	\$600.00	\$600.00 100% of fair market value, up to any	735 ILCS 5/12-1001(b)
Brief description: Toyota, Prius, 2014, used Line from	\$13,275.00	applicable statutory limit 100% of fair market value, up to any	735 ILCS 5/12-1001(c)

		Case 16-23217	Doc 1	Filed 07/20/16	Entered 07/20/	/16 09:36:46	Desc Main	
Fill	in this informa	ation to identify your case:			<u> </u>			
Deb	otor 1	Consuelo		Davis	s			
		First Name	Mide	dle Name Last i	Name			
	otor 2 ouse, if filing)	First Name	Mide	dle Name Last i	Name			
Uni	ted States Ba	nkruptcy Court for the: <u>N</u>	lorthern	District of I				
Cas	se number			(State)			
(If k	nown)							
∩f	ficial F	orm 106D						eck if this is a
			۳۵ \۸/L	a Haya Clair	ma Caaurad	by Drana		ended filing
<u> </u>	neau	ie D: Credito	rs vvr	no Have Clai	ms Secured	by Prope	rty	12/1
corı	n. On the Do any cre No. Cr Yes. Fi	mation. If more space top of any additional ditors have claims secured teck this box and submit this Il in all of the information belo	e is needed pages, we have been been been been been been been be	If two married peopled, copy the Addition write your name and roperty?	nal Page, fill it out, i case number (if kno	number the entri own).		
Par		All Secured Claims						
2.				one secured claim, list the c n, list the other creditors in F			Column B	Column C
		the claims in alphabetical o		· ·	art 2. As much as	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1		HOME MORTGAGE	— Dagariha	the weeperty that accura	the eleim.	\$141,551.00	\$102,666.67	\$38,884.33
	Creditor's Na 4801 FRED		-	the property that secures	the claim:			
	Number	Street	360 Mort	gage e date you file, the claim is	· Check all that apply			
				ingent	. Oncor all triat apply.			
	OWENSBO City	OR Gentucky 42301 State ZIP Code		quidated				
	- ',	the debt? Check one.	Disp	•				
	✓ Debtor	1 only	Nature o	of lien. Check all that apply.				
	Debtor	•	An a	greement you made (such a	s mortgage or secured			
		1 and Debtor 2 only one of the debtors and	car lo	,	a ala aciala lia a			
	another			utory lien (such as tax lien, m	iecnanic's lien)			
		if this claim relates to a		ment lien from a lawsuit r (including a right to offset)				
		unity debt vas incurred <u>10/1/2014</u>	_	,				
	1		Last 4 di	igits of account number_	4331			
2.2	TOYOTA M Creditor's Na	OTOR CREDIT	Describe	the property that secures	the claim:	\$23,492.00	\$13,275.00	<u>\$10,217.00</u>
	1111 W 221	ND ST STE 420	2014 Toy	ota Prius				
	Number	Street		e date you file, the claim is	: Check all that apply.			
	OAK		Cont	ingent				
	BROOK	Illinois 60523	_ Unlic	quidated				
	City Who owes	State ZIP Code the debt? Check one.	Disp	uted				
	✓ Debtor		Nature o	of lien. Check all that apply.				
	Debtor	2 only		greement you made (such a	s mortgage or secured			
	Debtor	1 and Debtor 2 only	car lo	oan) itory lien (such as tax lien, m	echanic's lien)			
		one of the debtors and	=	nory lien (such as tax lien, m Iment lien from a lawsuit	icoriariico li c ri)			
	another	if this claim relates to a		r (including a right to offset)				
	commu	unity debt	_	,	0001			
		vas incurred <u>11/1/2014</u>	_	igits of account number_		Ø465.040.00	I	
		add the dollar value of yo	ur entries i	n Column A on this page.	write that number	\$165,043.00	I	

		Case 16-2321		07/20/16	Entered 07/	<u>/2</u> 0/16 09:36:46	Desc	Main	
Fill in	this informa	ation to identify your case							
Debto	or 1	Consuelo		Davis					
		First Name	Middle Name	Last Na	me				
Debto									
(Spou	se, if filing)	First Name	Middle Name	Last Na	me				
United	d States Ba	nkruptcy Court for the:	Northern	District of Illin	nois ate)				
Case (If know	number								
•		orm 106E/F					Che	ck if this is an	amended filing
			114 				<u> </u>		
Sci	nedu	ie E/F: Cre	ditors Who	Have Ur	nsecured	d Claims			12/15
106Á/E are list the bo	B) and on Sted in Sche xes on the	Schedule G: Executory edule D: Creditors Who left. Attach the Contin	xpired leases that could r Contracts and Unexpired of Hold Claims Secured by tuation Page to this page. Y Unsecured Claims	d Leases (Official y Property. If mo . On the top of a	Form 106G). Do r re space is neede	not include any creditor d, copy the Part you ne	rs with parti ed, fill it ou	ally secured t, number the	claims that e entries in
1. [[ditors have priority unso to Part 2.	secured claims against yo	ou?					
i F F	dentify what possible, list Part 1. If mo	t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hold	claims. If a creditor has mo aim has both priority and nor al order according to the cre ds a particular claim, list the claim, see the instructions for	npriority amounts, editor's name. If yo other creditors in	list that claim here a ou have more than t Part 3.	ind show both priority and	Inonpriority a	amounts. As r	much as
							Total claim	Priority amount	Nonpriority amount
									

Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main Doc 1 Debtor 1 Documernt Page 24 of 73 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 CBNA \$7,143.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? 11/1/2014 Street Number As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls South Dakota 57117 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt CreditCard Is the claim subject to offset? Other. Specify **✓** No Yes 4.2 CBNA \$1,354.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? 9/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 57117 Sioux Falls South Dakota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt <u>Credit</u>Card Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 CBNA \$1,354.00 Last 4 digits of account number 1473 Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? 9/1/2015 Street Number As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls South Dakota 57117 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

CreditCard

Debtor 1 Consula Gase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 (09/36:46 Desc Main

Your NONPRIORITY Unsecured Claims - Continuation Page **Total claim** After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. 4.4 City of Chicago Parking \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago 60602 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt V Other. Specify parking tickets Is the claim subject to offset? **✓** No Yes 4.5 CREDITORS PROTECTION S \$76.00 Last 4 digits of account number 0705 Nonpriority Creditor's Name 308 W STÁTE ST STE 485 When was the debt incurred? 6/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent ROCKFORD Illinois 61101 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |~| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL Is the claim subject to offset? ✓ CREDITOR: MEDICAL PAYMENT **V** No Other. Specify DATA Yes 4.6 DIVERSIFIED CONSULTANT \$127.00 Last 4 digits of account number 2337 Nonpriority Creditor's Name 10550 DEERWOOD PARK BLVD When was the debt incurred? 5/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL CREDITOR: TMOBILE Is the claim subject to offset? Other. Specify **✓** No

Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	Total claim		
4.7	KOHLS/CAPONE	Last 4 digits of account number	\$117.00
	Nonpriority Creditor's Name PO Box 3004	When was the debt incurred? 3/1/2013	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	Milwaukee Wisconsin 53201	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No		
	Yes		
4.8	KOHLS/CAPONE	- Last 4 digits of account number 0816	\$117.00
	Nonpriority Creditor's Name PO Box 3004	When was the debt incurred? 3/1/2013	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Milwaukee Wisconsin 53201	Contingent	
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CreditCard	
	✓ No	_	
	Yes		
4.9	MERCHANTS CREDIT GUIDE	- Last 4 digits of account number 1924	\$216.00
	Nonpriority Creditor's Name 223 W JACKSON BLVD # 700	When was the debt incurred? 12/1/2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago Illinois 60606	Contingent	
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for ORIGINAL	
	✓ No	CREDITOR: MEDICAL PAYMENT Other. Specify DATA	
	Yes	Outon Opcomy Drift	

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First Name Documer'nt Page 27 of 73

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					
4.10 MERCHANTS CREDIT GUIDE Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 Number Street	Last 4 digits of account number 1925 When was the debt incurred? 12/1/2015	\$121.00			
Chicago Illinois 60606 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts O11 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT Other. Specify DATA				
4.11 MERCHANTS CREDIT GUIDE Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 Number Street Chicago Illinois 60606	Last 4 digits of account number 4913 When was the debt incurred? 9/1/2014 As of the date you file, the claim is: Check all that apply. Contingent	\$61.00			
City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT Other. Specify DATA				
A.12 Navient Nonpriority Creditor's Name 1002 ARTHUR DR Number Street	Last 4 digits of account number 0714 When was the debt incurred? 7/1/2006 As of the date you file, the claim is: Check all that apply.	\$39,757.00			
LYNN HAVEN Florida 32444 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 				

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irst Name Middle Name Documet Name Page 28 of 73

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.13 ROBERT MORRIS COLLEG \$15,528.00 Last 4 digits of account number Nonpriority Creditor's Name 401 S. STATE ST. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** 60605 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify school fees **✓** No Yes 4.14 SEARS/CBNA \$6,961.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6282 When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent South Dakota 57117 Sioux Falls Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? \Box Other, Specify CreditCard **✓** No Yes 4.15 SYNCB/CARE CREDIT \$4,060.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965036 When was the debt incurred? 5/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent ORLANDO Florida 32896 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify CreditCard **✓** No

Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					
After listing any entries on this page, number them beginnin SYNCB/CARECR Nonpriority Creditor's Name C/O PO BOX 965036 Number Street ORLANDO Florida 32896 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	with 4.5, followed by 4.6, and so forth. Last 4 digits of account number	Total claim \$3,944.00			
Is the claim subject to offset? ✓ No ☐ Yes	Other. Specify CreditCard				
4.17 SYNCB/VALUE CITY FURNI Nonpriority Creditor's Name 950 FORRER BLVD Number Street	Last 4 digits of account number When was the debt incurred? 11/1/2014 As of the date you file, the claim is: Check all that apply.	\$2,059.00			
KETTERING Ohio 45420 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard 				
4.18 SYNCB/VALUEC Nonpriority Creditor's Name C/O PO BOX 965036 Number Street	Last 4 digits of account number 0754 When was the debt incurred? 11/1/2014 As of the date you file, the claim is: Check all that apply. Contingent	\$2,059.00			
ORLANDO Florida 32896 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes	Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify CreditCard				

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.19	SYNCB/WALMART DC	— Last 4 digits of account number	\$1,944.00
	Nonpriority Creditor's Name PO BOX 965024		
	Number Street	When was the debt incurred? 9/1/2011	
		As of the date you file, the claim is: Check all that apply.	
	ORLANDO Florida 32896	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	No	<u> </u>	
	Yes		
4 20	SYNCB/WLMRTD		\$1,944.00
1.20	Nonpriority Creditor's Name	Last 4 digits of account number 5686	Ψ1,0-100
	PO Box 530927 Number Street	When was the debt incurred? 9/1/2011	
		As of the date you file, the claim is: Check all that apply.	
	Atlanta Georgia 30353	Contingent	
	Atlanta Georgia 30353 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No		
	Yes		
4.21	US Bank Nonpriority Creditor's Name	Last 4 digits of account number 7287	\$2,229.00
	425 Walnut Street	When was the debt incurred? 6/1/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	CincinnatiOhio45202CityStateZip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No		
	☐ Yos		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 \$2,229.00 Last 4 digits of account number Nonpriority Creditor's Name 425 Walnut Street When was the debt incurred? 6/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Ohio Cincinnati Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **~** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.23 Village of Woodridge \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 5 Plaza Dr When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Woodridge Illinois 60517 City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt $\overline{\mathsf{A}}$ Other. Specify parking tickets Is the claim subject to offset? **✓** No Yes

Doc 1 Debtor 1

Page 32 of 73 Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$0.00 **Total claims** \$39,757.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that 6i. amount here. \$93,600.00 6j. Total. Add lines 6f through 6i. 6j.

	Case 16-2321		7/20/16	Entered 07/2	20/16 09:36:46	Desc Main	
Fill in this inform	nation to identify your case): 		Ū			
Debtor 1	Consuelo		Davis				
	First Name	Middle Name	Last Na	me			
Debtor 2							
(Spouse, if filing) First Name	Middle Name	Last Na	me			
United States B	ankruptcy Court for the:	Northern	District of Illir	iois			
	, ,		(St	ate)			
Case number							
(If known)							
Official	Form 106G					Check if this amended fill	
Schedul	e G: Execut	ory Contracts	and Une	expired Le	eases		12/15
	d, copy the additional p					ng correct information. If more on all pages, write your name at	
1. Do you h	ave any executory	contracts or unexpire	d leases?				
		m with the court with your oth		u have nothing else t	o report on this form.		
Yes. Fill	in all of the information be	low even if the contracts or le	eases are listed o	n <i>Schedule A/B: Pro</i>	pperty (Official Form 106A	/B).	
		pany with whom you have nstructions for this form in the				ase is for (for example, rent, d unexpired leases.	
Persor	or company with whor	n you have the contract or	lease		State what the contract	t or lease is for	

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Fill	in this inform	nation to identify your case			07720/10 09.30.40	Desc Main
De	btor 1	Consuelo		Davis		
_		First Name	Middle Name	Last Name		
	btor 2 ouse, if filing	First Name	Middle Name	Last Name	_	
Un	ited States B	ankruptcy Court for the:	Northern	District of Illinois	_	
	se number known)			(State)	_	
						Check if this is an amended filing
Oi	fficial F	Form 106H				and all
		e H: Your Co	odebtors			12/1:
toge in the	ether, both a ne boxes on ry question.	are equally responsible the left. Attach the Add	for supplying correct informational Page to this page. O	mation. If more space is nee	ded, copy the Additional Pag Pages, write your name and c	If two married people are filing le, fill it out, and number the entries ase number (if known). Answer
2.	Louisiana, N No. G Yes. D	Nevada, New Mexico, Puo o to line 3. Did your spouse, former sp No	erto Rico, Texas, Washington,	and Wisconsin.) with you at the time?		ries include Arizona, California, Idaho,
		res. In which community s	state of territory and you live? _	FIII III trie	name and current address of th	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	_	
		Number Street			_	
		City	State	Zip Code	_	
3.	as a codeb	tor only if that person i	is a guarantor or cosigner. I	Make sure you have listed th		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> plumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Debtor 1 Consuled First Name Middle Name Last Name Debtor 2 Spouse. If filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number If known) Difficial Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equal seponsible for supplying correct information. If you are married and not filing jointly, and your spouse is filing with you not clude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional arges, write your name and case number (if known). Answer every question. Plyto hew more than one job. Information. If you have more than one plob. Information about additional employers. Employment status Debtor 1 Debtor 2 Employment status Debtor 1 Debtor 2 Employed Remployed Not Employed Remployed Not Employed Not	Fill in this	s information to identify	your case:			0/16 09	:36:46	Desc Maiı	n
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Describe Employment Describe Employment Describe Employment status Employed Describe Employed work. Cocupation Employer's address states Cocupation Employer's address Schaumburg Employed work. Cocupation Employer's address Schaumburg Employed work. Cocupation	Debtor 1					_			
An amended filling Flist Name Middle Name Last Name District of Illinois A supplement showing post-petition charge expenses as of the following date: MM / DD / YYYY		First Name	Middle Name	Last Name	!		Check if this i	s:	
United States Bankruptcy Court for the: Northern		:::\ -				_	_		
Scale Santupley Count for the Normern District of Illinois Expenses as of the following date: (State)	(Spouse, if f	iling) First Name	Middle Name	Last Name	;		=	ŭ	
Difficial Form 106 Schedule I: Your Income Let as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equal seponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you clude information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers and time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Employer's address Employer's address Employer's address Schaumburg Illinois 60173 City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless y as separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, atta a separated sheet to this form. For Debtor 1 For Debtor 2 For Debtor 3 For Debtor 2 For Debtor 3 For Debtor 4 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 6 For Debtor 1 For Debtor 9 For Debtor 1 For Debtor 1 For Debtor 1 For Debtor 2 For Debtor 2 For Debtor 3 For Debtor 4 For Debtor 4 For Debtor 5 For Debtor 5 For Debtor 6 For Debtor 1 For Debtor 1 For Debtor 1 For Debtor 1 For Debtor 2 For Debtor 2 For Debtor 3 For Debtor 4 For Debtor 4 For Debtor 5 For Debtor 5 For D	United State	es Bankruptcy Court for the:	Northern			-			
Schedule I: Your Income Is as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equal seponsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you relude information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separates sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation and include student or homemaker, if it applies. Employer's address		er		(0.0.00		-	MM / DD	/ YYYY	
asponsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional ages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Employment status Employed Occupation Lead Advisor Employed Group LLC Employer's name Employer's andress Occupation Lead Advisor Employer's andress Occupation Martingale Road Number Street Employer's address Occupation Martingale Road Number Street For Debtor 1 For Debtor 2 The Debtor 2 or non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attar a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2.			ome						12/1
If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Demonstrate Employer's address Employer's address Student or homemaker, if it applies. Part 2: Give Details About Monthly Income Employer, combine the information for all employers for that person on the lines below. If you need more space, attar a separate sheet to this form. Employered Pove Imployed Property I	nformatio ages, wr	on about your spouse ite your name and ca	e. If more space is neede se number (if known). A	ed, attach a s	eparate sl		•		
Figure F				Debtor 1			Debtor 2		
If you have more than one job, attach a separate page with information about additional employers. Employer's name Employer's name CEC Employee Group LLC Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless years separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attact a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse Schaumourg Illinois 60173 City State Zip Code City State Zip Code The Debtor 2 or non-filing spouse For Debtor 2 or non-filing spouse Schaumourg Illinois 60173 City State Zip Code The Debtor 2 or non-filing spouse Schaumourg Illinois 60173 City State Zip Code The Debtor 2 or non-filing spouse Schaumourg Illinois 60173 City State Zip Code Schaumourg Illinois 60173 City State Zip Code The Debtor 2 or non-filing spouse Schaumourg Illinois 60173 City State Zip Code Schaumourg Illinois 60173 City State Zip Code Schaumourg Illinois 60173 City State Zip Code The Debtor 1 State Zip Code Schaumourg Illinois 60173 City State Zip Code Schaumourg Illinois 60173 City State Zip Code Schaumourg Illinois 60173 City State Zip Code The Debtor 1 State Zip Code Schaumourg Illinois 60173 City State Zip Code Scha	•		Employment status	✓ Employed			Employe	d	
attach a separate page with information about additional employers. Employer's name Employer's name Employer's address or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Schaumburg Illinois 60173 City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless years separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attact a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$7,143.72		•		= '	/od				
information about additional employers. Employer's name CEC Employee Group LLC	•			140t Employ	Cu			loycu	
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How long employed there? City State Zip Code City State Zip Code	(or homemaker, if it applies.		Schaumburg	Illinois	60173			
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Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless years separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attack a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$7,143.72			How long employed there?	3 years					
deductions.) If not paid monthly, calculate what the monthly wage would be.	Estimate are separal If you or you a separate	monthly income as of the otted. our non-filing spouse have mo sheet to this form. monthly gross wages, salar	date you file this form. If you have than one employer, combine the than one commissions (before all	ne information for payroll 2	all employers	for that person or Debtor 1	the lines below	v. If you need m	
3. Estimate and list monthly overtime pay. 3. + \$0.00					3.	+ \$0.00			

4. Calculate gross income. Add line 2 + line 3.

\$7,143.72

Filed 07/20/16 Debtor 1 Consuel Case 16-23217 <u>Entered</u> @3/20/166 09:36:46 <u>Desc Main</u> Doc 1 Middle Name Documentame Page 36 of 73 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$7,143.72 5. List all payroll deductions: \$1,921.14 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$71.44 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$460.12 5f. Domestic support obligations 5f. \$940.00 5g. Union dues 5g. \$0.00 \$100.00 5h. Other deductions. Specify: Health Savings Account 5h. + 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$3,492.70 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$3,651.02 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$3,651.02 \$3,651.02 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$3,651.02 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

	Case 16-2321	7 Doc 1 Filed 07	7/20/16 Entere	ed 07/20/16 (09:36:46	Desc Mai	n
Fill in this inform	ation to identify your cas		<u> </u>				
Debtor 1	Consuelo		Davis				
	First Name	Middle Name	Last Name				
Debtor 2				Che	eck if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name		An amended filin	g	
United States Ba	ankruptcy Court for the:	Northern	District of Illinois			nowing post-petition	
Case number			(State)	,	expenses as of the	he following date:	
(If known)				 .	MM / DD / YYYY		
۲ (۲ - ۲ - ۲ - ۲ - ۲ - ۲ - ۲ - ۲ - ۲ - ۲	400 l				, 22 ,		
Jiticiai F	<u>form 106J</u>						
Schedul	e J: Your Ex	penses					12/1
nformation. If m	ore space is needed, ver every question. ribe Your Househ	ble. If two married people are attach another sheet to this fo					nber
No. Go t							
Yes. Do	es Debtor 2 live in a se -	eparate nousenoid?					
	No						
	Yes. Debtor 2 must file	e Official Forms 106J-2, Expense	es for Separate Househo	old of Debtor 2.			
2. Do you have	dependents?	lo .					
Do not list De Debtor 2.		es. Fill out this information for ach dependent	Dependent's relation Debtor 1 or Debtor Child	2 a	Dependent's age 20 years	Does depen with you? No. Yes.	ndent live
3. Do your exp							
expenses of than	people other	No.					
yourself and	your	'es					
dependents	?						
Part 2: Estim	nate Your Ongoing	Monthly Expenses					
Estimate your of expenses as of applicable date	expenses as of your base a date after the bank s.	ankruptcy filing date unless yo ruptcy is filed. If this is a supp	elemental Schedule J, o	check the box at th	•	•	•
		ash government assistance it t on <i>Schedule I: Your Incom</i> e				Y	our expenses
	r home ownership exp the ground or lot. 4.	penses for your residence. Incl	ude first mortgage paym	ents and		4.	\$1,416.00
If not inclu	ded in line 4:						
4a. Real est	ate taxes					4a	\$0.00
4b. Property	, homeowner's, or rente	r's insurance				4b.	\$0.00
4c. Home m	aintenance, repair, and u	ipkeep expenses				4c.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 ConsulCase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16/09/36:46 Desc Main

Document Page 38 of 73 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$200.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$175.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$350.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$125.00 9. 10. Personal care products and services \$100.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$275.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$142.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _ \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: Student Loan Payment \$243.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	Consula ase 16-23217 First Name	Doc 1	Filed 07/20/16	Entered 07/20/16/09:36:46	Desc Main	
21 Othor		Wilde Harrie	Document Document	Page 39 of 73		\$0.00
21.Other	. Specily:				21	\$0.00
22 Colou	data vaur manthly avnances					
	llate your monthly expenses.				_	\$3,026.00
	add lines 4 through 21.	- Daluar 0) : (-	Official Farm 4001	0	_	\$0.00
	Copy line 22 (monthly expenses for	,-	•	-2	_	\$3,026.00
22c. A	dd line 22a and 22b. The result is	your monthly e	xpenses.		22.	
23. Calcu	late your monthly net income.					
23a. C	Copy line 12 (your combined mont	hly income) fron	n Schedule I.		23a	\$3,651.02
23b. C	copy your monthly expenses from l	line 22 above.			23b	\$3,026.00
	ubtract your monthly expenses fro		income.			\$625.02
-	The result is your monthly net inco	ome.			23c	
24. Do vo	ou expect an increase or decre	ase in vour exi	penses within the year af	ter you file this form?		
•	·		•	•		
	example, do you expect to finish pa gage payment to increase or deci					
	No			3.3.		
_						
П,	⁄es					
	Explain here:					

		Case 16-2321	7 Doc 1 Filed 0	7/20/16 En	tered 07/20/16 09:	·26·46 D	oce Main
Fill	in this inform	nation to identify your case		7170/18 FII	<u>leren (1772</u> 0/10 09.	.30.40 D	esc main
Del	otor 1	Consuelo		Davis			
		First Name	Middle Name	Last Name			
	otor 2 ouse, if filing	First Name	Middle Name	Last Name			
Uni	ted States B	ankruptcy Court for the:	Northern	District of Illinois			
				(State)			
	se number nown)	-					
Of	ficial F	Form 106De	<u>C</u>				Check if this is a amended filing
De	clarat	ion About a	n Individual De	btor's Sch	edules		12/1
f tw	o married p	eople are filing togethe	er, both are equally respons	ible for supplying co	orrect information.		
	t 1: Sign		eone who is NOT an attorney	to help you fill out	bankruptcy forms?		
	✓ No						
	Yes. N	Name of person			ruptcy Petition Preparer's No official Form 119).	tice, Declaration	, and
		nalty of perjury, I declard are true and correct.	e that I have read the summa		iled with this declaration ar	nd	
×	/s/ Consu			*_			
	Signature o	t Debtor 1		S	ignature of Debtor 2		
	Date 7/20/	2016 DD/YYYY		D	ate MM/DD/YYYY		

Fill in	this inform	Case 16-23217 ation to identify your case:	Doc 1	Filed 07/20/16	Entered 07	/20/16 09:36:46	Desc Main
Debt		Consuelo		Davis			
Debt		First Name	Middle N				
		First Name ankruptcy Court for the:	Middle N	lame Last Nar District of Illine			
	number	and apply Countries the	Northern	(Sta			
(If kno	own)						Check if this is a
		orm 107					amended filing
Be as space	complete is needed		e. If two married to this form. On	people are filing together the top of any additional	r, both are equall pages, write you	y responsible for supply	ving correct information. If more er (if known). Answer every question
Part 1.		your current marital stat		and where fou Live	ed Before		
	Mari		us :				
2.	During th	ne last 3 years, have you	lived anywhere o	ther than where you live	now?		
	✓ No Yes.	List all of the places you liv	ed in the last 3 yea	rs. Do not include where yo	u live now.		
	Deb	tor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					Same as I	Debtor 1	Same as Debtor 1
	Num	ber Street		From	Number Stree	 et	From
				То			To
	City	State	Zip Code		City	State Zip C	ode
					Same as I	Debtor 1	Same as Debtor 1
	Num	ber Street		From	Number Stre	et e	From
	Num	ber Street		From	Number Stree	et	From

Debtor 1 Consul Gase 16-23217
First Name
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 Doc 1

Part 2: Explain the Sources of Your Income

4.	Did you have any income from employment Fill in the total amount of income you received f activities. If you are filing a joint case and you ha	rom all jobs and all businesses	, including part-time	•	
	No✓ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$41425.96	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: (January 1 to December 31, 2015) YYYY	✓ Wages, commissions, bonuses, tips Operating a business	\$82909.00	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: (January 1 to December 31,	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$74109.00	Wages, commissions, bonuses, tips Operating a business	
	Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details.	e is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child su from lawsuits; royalties; and	gambling and lottery winnings.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:				
	For last calendar year: (January 1 to December 31,				
	For the calendar year before that: (January 1 to December 31,				

Debtor 1 Consul Gase 16-23217
First Name Doc 1

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Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Are eith	er Debtor 1's o	r Debtor 2's o	debts primarily con	sumer debts?			
No.			or 2 has primarily c sehold purpose."	onsumer debts. Cons	sumer debts are defined in 1	1 U.S.C. § 101(8) as "incurr	ed by an individual primarily
	During the 90 o	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$6,425* or more?	,	
	No. Go to	line 7.					
	tota	l amount you p	paid that creditor. Do	not include payments fo	more in one or more payme or domestic support obligatio attorney for this bankruptcy	ons, such as	
	* Subject to adj	ustment on 4/0	01/19 and every 3 yea	ars after that for cases f	iled on or after the date of ac	ljustment.	
✓ Yes.	. Debtor 1 or D	ebtor 2 or bo	th have primarily c	onsumer debts.			
_	During the 90 c	days before yo	u filed for bankruptcy,	did you pay any credito	or a total of \$600 or more?		
	✓ No. Go to		, i i i i i i i i i i i i i i i i i i i	, , ,	, , , , , , , , , , , , , , , , , , ,		
	Yes. List	below each cr creditor. Do n	ot include payments		ore and the total amount you oligations, such as child sup ankruptcy case.	•	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	editor's Name				-	-	Mortgage Car Credit card
_							Loan repayment Suppliers or
Cit	ty	State	Zip Code				vendors Other
Cr	editor's Name				_	_	─ Mortgage─ Car
Nu	ımber Street						Credit card Loan repayment
Cit	ty	State	Zip Code				Suppliers or vendors Other
_							- Mortgage
Cr	editor's Name						Car
Nu	ımber Street						Credit card
_							Loan repayment
Cit	tv	State	Zip Code				Suppliers or vendors
Oil	• 9	Sidio	Zip Oodc				Other

Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main Consuc ase 16-23217 Doc 1 Debtor 1 Document Page 44 of 73 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Consucta 16-23217 First Name Filed 07/20/16 Entered 07/20/16/09:36:46 Desc Main Documenter Page 45 of 73 Doc 1

Within 1 year before you filed for ba						
List all such matters, including personal disputes.						
✓ No Yes. Fill in the details.						
_	Nature	of the case	Court or a	igency		Status of the case
Case title						Pending
			Court Nam	ie		On appeal
Case number			Number S	treet		Concluded
			City	State	Zip Code	_
Case title						Pending
			Court Nam	ne		On appeal
Case number			Number S	treet		- Concluded
			City	State	Zip Code	_
		Describe the pro	operty		Date	Value of the property
Creditor's Name		-				
		Explain what hap	ppened			
Number Street						
		□ Burnet on				
			repossessed.			
		Property was Property was Property was	foreclosed.			
City State	Zip Code	Property was Property was Property was	foreclosed. garnished. attached, seized,	or levied.		
	Zip Code	Property was Property was	foreclosed. garnished. attached, seized,	or levied.	Date	Value of the property
City State	Zip Code	Property was Property was Property was	foreclosed. garnished. attached, seized,	or levied.	Date	
	Zip Code	Property was Property was Property was	foreclosed. garnished. attached, seized, operty	or levied.	Date	
City State	Zip Code	Property was Property was Property was Property was Describe the pro	foreclosed. garnished. attached, seized, operty	or levied.	Date	
City State Creditor's Name	Zip Code	Property was Property was Property was Property was Describe the pro Explain what hap	foreclosed. garnished. attached, seized, pperty ppened repossessed.	or levied.	Date	
City State Creditor's Name	Zip Code	Property was Property was Property was Describe the pro Explain what hap	foreclosed. garnished. attached, seized, operty ppened repossessed. foreclosed.	or levied.	Date	

Deb	tor 1	Consu ©ase 16-23217 Doc First Name Middle Nam		<u> 07/20/16 </u>	6/ 09 ::36: <u>46 Desc</u>	<u>Main</u>
11.		nin 90 days before you filed for bankrup ounts or refuse to make a payment beca No		reditor, including a bank or financial institu	tion, set off any amounts fr	om your
	Ħ	Yes. Fill in the details.				
				Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name				
		Niversham Charact				
		Number Street		Last 4 digits of account number: XXXX-		
				East Faight of addount number. 7000		
		City State Zip	Code			
12.		in 1 year before you filed for bankruptc iver, a custodian, or another official?	y, was any of	your property in the possession of an assig	gnee for the benefit of cred	tors, a court-appointed
	✓	No Yes				
Part	5.	List Certain Gifts and Contribut	ions			
13.				give any gifts with a total value of more than	\$600 per person?	
13.	✓	No	ncy, ala you	give any gints with a total value of more than	1 \$000 per person:	
		Yes. Fill in the details for each gift.				
		Gifts with a total value of more than \$6 per person	600	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift				
		Number Street				
		City State Zip	Code			
		Person's relationship to you				
		Person to Whom You Gave the Gift				
		Number Street				
		City State Zip	Code			
		Person's relationship to you				

		FIRST Name	Middle Name	ocument Page 47 of 73		
14.	With	nin 2 years before you f		give any gifts or contributions with a total value of mor	e than \$600 to an	y charity?
		No Yes. Fill in the details for	each gift or contribution.			
		Gifts with a total value per person	-	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name		_		
				_		
		Number Street		_		
Dow	<u></u>	•	ate Zip Code			
Part 15.		_ist Certain Losses		you filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
	gam	bling?			, ,	,
		No Yes. Fill in the details.				
		Describe the property how the loss occurred		Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
				insurance claims on line 33 of Schedule A/B: Property.	1	
Part		ist Certain Payme				
16.	seek	ing bankruptcy or prep	paring a bankruptcy petition	or anyone else acting on your behalf pay or transfer any p n? dit counseling agencies for services required in your bankrupto		ne you consulted about
	_	No	,, , ,			
	\square	Yes. Fill in the details.				
				Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attomey's Fee - 350.00	7/8/2016	\$350.00
		Person Who Was Paid		_	<u></u>	***************************************
		20 South Clark Street 28	8th Floor	_		
		Number Street				
		Chicago Illii	nois 60606			
		City Sta	ate Zip Code	_		
		Email or website address		_		
		Person Who Made the P	ayment, if Not You			
		Person Who Was Paid				
		Number Street		_		
		City Sta	ate Zip Code	-		
		Email or website address	S	-		
		Person Who Made the P	ayment, if Not You			

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Deb	otor 1	Consud Gase 16-23217 First Name		d 07/20/16 ocumetht	Entered @7/20 Page 48 of 73	1.6 (09 ;36:	46 Desc	<u>Main</u>	
17.	you	nin 1 year before you filed for ba deal with your creditors or to ma ot include any payment or transfer	ake payments to you	r creditors?	ng on your behalf pay o	r transfer any p	property to anyor	ne who p	promised to help
	✓	No Yes. Fill in the details.							
				Description and	d value of any property	transferred	Date payment or transfer was made	Amoui	nt of payment
		Person Who Was Paid							
		Number Street							
		City State	Zip Code						
18.	Inclu trans	nin 2 years before you filed for be nary course of your business or de both outright transfers and transfers that you have already listed on No Yes. Fill in the details.	financial affairs? sfers made as security					-	
		Too. I III III die dotalle.		Description and property transfe			property or paymebts paid in exch		Date transfer was made
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
19.	(The	nin 10 years before you filed for se are often called asset-protection No		transfer any prop	perty to a self-settled tru	st or similar de	evice of which yo	u are a l	peneficiary?
		Yes. Fill in the details.		Description an	d value of the property	transferred			Date transfer was made
		Name of trust							THOS ITIAUC

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Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20.	or tra	nin 1 year before you filed for ba ansferred? de checking, savings, money mark peratives, associations, and other fi	et, or other financial							
		No Yes. Fill in the details.								
		ies. i iii iii tie tetaiis.		Last 4 numb	l digits of account er		Type of a	account or ent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid		- XXXX	-		Chec	cking ngs		
		Number Street		-		[[ey market ærage er		
		City State	Zip Code	-						
		Person Who Was Paid		- XXXX	-		Chec	cking ngs		
		Number Street		-			Brok	ey market erage		
						L	Othe	er		
		City State	Zip Code	-						
	✓	ables? No Yes. Fill in the details.	w	/ho else	had access to it?			Describe the contents	3	Do you still have it?
		Name of Financial Institution	Na Na	ame						☐ No
		Number Street	Nu	umber	Street					Yes
		-	Ci	tv	State	Zip Coo	de.			
		City State	Zip Code	-,		_p				
22.	Have	e you stored property in a stora	ge unit or place oth	er than	your home within	1 year be	efore yo	ou filed for bankruptcy	?	
		No Yes. Fill in the details.								
			w	ho else	had access to it?			Describe the contents	S	Do you still have it?
		Name of Storage Facility	Na	ame						☐ No ☐ Yes
		Number Street	No.	umber	Street					
		-	Ci	ty	State	Zip Cod	de			
		City State	Zip Code							

Debt		Consuctase 16-23217 Doc 1 First Name Middle Name	Filed 076	≝nt ^{me} Paç	<u>ntered</u>	30 √1.6 ∕0.9 ;36: <u>46 Desc Mai</u>	n
Part	9:	dentify Property You Hold or Contro	I for Some	one Else			
23.	_	ou hold or control any property that someone No Yes. Fill in the details.	e else owns? I	nclude any pro	perty you borro	owed from, are storing for, or hold in tru	st for someone.
	ш	ics. I ill ill the details.	Where is th	ne property?		Describe the contents	Value
		Owner's Name	Number Str	eet		-	
		Number Street				-	
			City	State	Zip Code	-	
		City State Zip Code	_				
Part	10:	Give Details About Environmental In	formation				
For	the p	urpose of Part 10, the following definitions apply:					
	ha in	nvironmental law means any federal, state, or local szardous or toxic substances, wastes, or material is cluding statutes or regulations controlling the clea- te means any location, facility, or property as define	nto the air, land nup of these su	, soil, surface wa bstances, waste	ater, groundwater es, or material.	, or other medium,	
		used to own, operate, or utilize it, including dispo		viioriinentariaw,	Wholier you now	own, operate, or unize it	
		azardous material means anything an environment xic substance, hazardous material, pollutant, conta			raste, hazardous s	substance,	
Rep	ort all	notices, releases, and proceedings that you know	about, regardle	ess of when they	occurred.		
24.	Has	any governmental unit notified you that you r	may be liable o	or potentially lia	able under or in	violation of an environmental law?	
	<u> </u>	No					
	Ц	Yes. Fill in the details.	Governme	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Government			_	
		Number Street	Number Str	eet			
			City	State	Zip Code	-	
		City State Zip Code	=				
25.	Have	e you notified any governmental unit of any re	elease of haza	rdous material	?		
	V	No					
	Ц	Yes. Fill in the details.	Governme	ntal unit		Environmental law, if you know it	Date of notice
		Name of site	Government	al unit		_	
						_	
		Number Street	Number Str	eet			
			City	State	Zip Code	_	

		First Name	Mi	iddle Name	Document Page 51 of 73			
26. I	Have	eve you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	✓	No Yes. Fill in the detail:	S.					
				(Court or agency	Nature of the case	Status of the case	
		Case title					Pending	
				(Court Name		On appeal	
		Case number		ī	Number Street		Concluded	
				Ō	City State Zip Code			
Part 1	1:	Give Details Ab	out Your Bu	isiness or C	onnections to Any Business			
27.	With	nin 4 years before y	ou filed for bar	nkruptcy, did yo	ou own a business or have any of the follow	ing connections to any business?		
		A member of a A partner in a p An officer, direc	limited liability of artnership tor, or managing	ompany (LLC) or g executive of a c		-time		
		An owner of at i	east 5% of the v	oting or equity s	ecurities of a corporation			
	✓	No. None of the above						
	Ш	Yes. Check all that ap	pply above and f	fill in the details b	elow for each business.			
					Describe the nature of the business	Employer Identification num include Social Security numb		
		Business Name			_	EIN:		
		Number Street			Name of accountant or bookkeeper	Dates business existed		
		City	State	Zip Code	<u> </u>	From To		
		Gity	State	Zip Code			<u> </u>	
					Describe the nature of the business	Employer Identification num include Social Security number		
		Business Name				EIN:		
		Number Street			Name of accountant or bookkeeper	Dates business existed		
		City	State	Zip Code		FromTo	_	
					Describe the nature of the business	Employer Identification num include Social Security numb		
		Business Name			_	EIN:		
		Number Street			Name of accountant or bookkeeper	Dates business existed		
		City	State	Zip Code	_	FromTo	_	

Debtor 1 Consul Gase 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 (09:36:46 Desc Main

Debtor		<u>ed 07½0/16 Entered </u> ଢ7/20/16 <i>୍</i> 09%36: <u>46 Desc Main</u> ocument Page 52 of 73
		give a financial statement to anyone about your business? Include all financial institutions,
<u> </u>	No Yes. Fill in the details below.	
	_	Date issued
	Name	MM/DD/YYYY
	Number Street	_
	City State Zip Code	_
Part 12	2: Sign Below	
an	d correct. I understand that making a false statement,	Affairs and any attachments, and I declare under penalty of perjury that the answers are true, concealing property, or obtaining money or property by fraud in connection with a prisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debtor 1	Signature of Debtor 2
	Date 7/20/2016	Date
Die	d you attach additional pages to Your Statement of Fill No	nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Die	d you pay or agree to pay someone who is not an attor	rney to help you fill out bankruptcy forms?
~	No	
L	Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

م سما	Camazzala Basila	Northern District of fill		
In re _	Consuelo Davis Debtor		Case No.	(If known)
			Chapter	Chapter 13
1.	DISCLOSURE OF C Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one ye rendered or to be rendered on behalf of	ar before the filing of the petition in	am the attorney for the n bankruptcy, or agreed	abovenamed debtor(s) and that to be paid to me, for services
	For legal services, I have agreed to acc	cept		\$4,000.0
	Prior to the filing of this statement I have	ve received		\$350.0
	Balance Due			\$3,650.0
2.	The source of the compensation paid to	me was:		
	Debtor	Other (specify)		
3.	The source of the compensation paid to	o me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the aboundmembers and associates of my law	ve-disclosed compensation with ar v firm.	ny other person unless t	hey are
	I have agreed to share the above-d members or associates of my law the people sharing in the compensation.	firm. A copy of the agreement, too		
5.	In return for the above-disclosed fee, I a. Analysis of the debtor's financial bankruptcy;	-		
	b. Preparation and filing of any pet	ition, schedules, statements of aff	airs and plan which mag	y be required;
	c. Representation of the debtor at	the meeting of creditors and confir	mation hearing, and any	adjourned hearings thereof;
	d. Representation of the debtor in	adversary proceedings and other	contested bankruptcy m	atters;
6.	By agreement with the debtor(s), the ab	pove-disclosed fee does not includ	e the following services	:
		CERTIFICATION		
	I certify that the foregoing is a complete debtor(s) in this bankruptcy proceedings.		rangement for payment	to me for representation of
_	7/20/2016		s/ Mark Bernachea	
	Date		Signature of Attorney	
			Semrad Law Firm	

Name of law firm

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

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C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 72.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 07/08/16

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$310	total fee
+	\$75	administrative fee
	\$235	filing fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main UNITED STATES BANKBURICY COURT Northern District of Illinois

In re:	Davis, Consuelo	Case No							
	Debtor(s)								
		Chapter.	Chapter13						
	VERIFICATIO	VERIFICATION OF CREDITOR MATRIX							
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the beautiful to the description.								
Date:	7/20/2016	/s/ Davis, Consuelo							
		Davis Consuelo							

Signature of Debtor

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US BANK HOME MORTGAGE 4801 FREDERICA ST OWENSBORO, KY 42301 USA

Navient 1002 ARTHUR DR LYNN HAVEN , FL 32444 USA

TOYOTA MOTOR CREDIT 1111 W 22ND ST STE 420 OAK BROOK , IL 60523 USA

CBNA PO Box 6497 Sioux Falls , SD 57117 USA

SEARS/CBNA PO Box 6282 Sioux Falls , SD 57117 USA

SYNCB/CARE CREDIT PO BOX 965036 ORLANDO , FL 32896 USA

SYNCB/CARECR C/O PO BOX 965036 ORLANDO , FL 32896 USA

US Bank 425 Walnut Street Cincinnati , OH 45202 USA

US Bank 425 Walnut Street Cincinnati , OH 45202 USA

SYNCB/VALUEC C/O PO BOX 965036 ORLANDO , FL 32896 USA

SYNCB/VALUE CITY FURNI 950 FORRER BLVD KETTERING , OH 45420 USA

SYNCB/WLMRTD PO Box 530927 Atlanta , GA 30353 USA Case 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main

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SYNCB/WALMART DC PO BOX 965024 ORLANDO , FL 32896 USA

CBNA PO Box 6497 Sioux Falls , SD 57117 USA

CBNA PO Box 6497 Sioux Falls , SD 57117 USA

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606 USA

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE , FL 32256 USA

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606 USA

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201 USA

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201 USA

CREDITORS PROTECTION S 308 W STATE ST STE 485 ROCKFORD , IL 61101 USA

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606 USA

ROBERT MORRIS COLLEG 401 S. STATE ST. CHICAGO , IL 60605 USA

Village of Woodridge 5 Plaza Dr Woodridge , IL 60517 USA Case 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main Page 67 of 73

Case 16-23217 Doc 1 Filed 07/20/16 Entered 07/20/16 09:36:46 Desc Main Debtor 1 Consuelo Documerial Page 68 of 73 number (if known) First Name Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ☐ No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? 1,000-5,000 25,001-50,000 **✓** 1-49 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$500,000,001-\$1 billion \$0-\$50,000 \$1,000,001-\$10 million 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$10,000,000,001-\$50 billion **\$100,001-\$500,000** \$50,000,001-\$100 million to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$500,000,001-\$1 billion \$1,000,001-\$10 million \$0-\$50,000 20. How much do you \$1,000,000,001-\$10 billion \$50,001-\$100,000 \$10,000,001-\$50 million estimate your \$10,000,000,001-\$50 billion liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$100,000,001-\$500 million More than \$50 billion \$500,001-\$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11. United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Consuelo Davis Signature of Debtor 1 Executed on ___7/8/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Fill in this information to identify your case:							
Debtor 1	Consuelo	Davis					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)				
Case number (If known)							

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Part 1: Sign Below						
Did you pay or agree	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
☑ No						
Yes. Name of pers	son	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
	ury, I declare that I have read the summary an	d schedules filed with this declaration and				
that they are true and correct.						
Signature of Debtor 1		Signature of Debtor 2				
Date 7/8/2016		Date				
MM/DD/YYYY		MM/DD/YYYY				

No Yes Fill in the	ner parties. ne details below.					
103.1 11111	ic details below.		Date issued			
Name			MM/DD/YYYY			
Number	Street					
City	State	Zip Code				
Sign Bel						
ive read the ai	derstand that maki	ng a false stateme	nt, concealing prop	tachments, and I declare under per erty, or obtaining money or prope to 20 years, or both. 18 U.S.C. §§	erty by fraud in conne	ection with a
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Northern District of Illinois

In re:	Davis, Consuelo	Case No.	
	Debtor(s)	0000110	
		Chapter.	Chapter13
	VERIFICAT	CATION OF CREDITOR MATI	RIX
	The above named Debtors hereby verify t	hat the attached list of creditors is true ar	nd correct to the best of their knowledge
Date:	7/8/2016	/s/ Davis, Consuelo	Civm
		Davis, Consuelo	

Deb	tor 1	Consuelo First Name Middle Name Documest Name Page 72 of 73 Name Page 72 of 73 Name Page 72 of 73 Name Name Name Name Name Name Name Name			
16.	Calc	culate the median family income that applies to you. Follow these steps:			
	16a.	Fill in the state in which you live.			
	16b.	Fill in the number of people in your household.			
	16c.	Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.	\$63,896.00		
17.	Hov	v do the lines compare?			
	17a.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).			
	17b.	Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.			
art	3:	Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)			
18.	Сор	y your total average monthly income from line 11.	\$6,904.33		
19.		uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.			
	19a.	If the marital adjustment does not apply, fill in 0 on line 19a.	-\$0.00		
	19b.	Subtract line 19a from line 18.	\$6,904.33		
20.	Calc	culate your current monthly income for the year. Follow these steps:			
	20a.	Copy line 19b.	\$6,904.33		
		Multiply by 12 (the number of months in a year).	x 12		
	20b.	The result is your current monthly income for the year for this part of the form.	\$82,851.96		
	20c.	Copy the median family income for your state and size of household from line 16c.	\$63,896.00		
21.	How	do the lines compare?			
	Bearmank	Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.			
	SANKAR	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.			
art	4: \$	Sign Below			
		By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.			
		Is/ Consuelo Davis			
		Signature of Debtor 1 Signature of Debtor 2			
		Date 7/8/2016 Date			
		MM/DD/YYYY MM/DD/YYYY			
		If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.			
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Debtor 1 Case 16-23217	7 Doc 1 Filed 07/20/16 Middle Name Documes Name	Entered 07/20/16 09:36:46 Page 73 of 73 number (if known)	Desc Main			
Part 4: Sign Below						
By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.						
🗴 /s/ Consuelo Davis 💢 🗶						
Signature of Debtor 1		Signature of Debtor 2				
Date 7/8/2016 MM/DD/YYYY		DateMM/DD/YYYY				